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Bureau of Epidemiology & Public Health Informatics

## Back to School Clarifications and Reminders

by Allison Zaldivar, MPH

### Influenza

- Individual cases of influenza are not reportable in Kansas; however, on May 11, 2018, requirements for isolation and quarantine of specific infectious or contagious diseases were updated. K.A.R. 28-1-6 now states that each person with a case of influenza is required to be isolated at home for seven days following the onset of illness except when seeking medical care.
- For isolation purposes, a case of influenza is a person who has tested positive for influenza, whether that be by a rapid, PCR, or other influenza test and is experiencing symptoms of influenza-like illness.
- Cases of influenza who received this year's vaccine are not exempt from isolation requirements.
- The local health officer or the Secretary of the Kansas Department of Health and Environment (KDHE) has the authority to alter this requirement based on nationally recognized guidance.
  - Persons with influenza can be infectious up to seven days following onset of symptoms and often have fever lasting at least five days. The recommendation to stay isolated until fever free for 24 hours is comparable to staying home for seven days.
  - When started promptly, antiviral drugs can lessen symptoms and shorten duration of symptoms by about one day.
  - Cases of influenza should not be sought out; exclusions should only be implemented if reported to the local health department.
- Influenza cases are not required to be entered into EpiTrax; this includes any persons actively being excluded.

### Influenza Outbreaks

KDHE requests that any school closures due to influenza or influenza-like illness be reported to KDHE. KDHE should also be notified when a situation related to influenza or influenza-like illness arises that may garner media attention. KDHE is always available to provide any technical assistance including prevention and control recommendations.

### Streptococcal infections

Persons with streptococcal infections, including erysipelas, scarlet fever, and streptococcal sore throats, that attend or work in a school or daycare setting are required to be excluded for ten days after onset of symptoms unless appropriate antimicrobial therapy was administered.

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## October Public Health Observances

### Fungal Disease Awareness Week

October 1-5



[www.cdc.gov/fungal/awareness-week.html](http://www.cdc.gov/fungal/awareness-week.html)

### International Infection Prevention Week

October 14-20



<http://professionals.site.apic.org/>

### Red Ribbon Week

October 23-31



<http://redribbon.org/>

### National Latinx AIDS Awareness Day

October 15



<https://www.cdc.gov/hiv/library/awareness/nlaad.html>

## Back to School Clarifications and Reminders Cont.

Those who received antimicrobial therapy should only be excluded for 24 hours after initiation of treatment. Similarly to influenza, exclusions should be enforced if reported to public health.

### Head Lice

Kansas regulation no longer requires persons with head lice to be excluded from school or child care. The Centers for Disease Control and Prevention, the American Academy of Pediatrics, and the National Association of School Nurses advocate that children should not be excluded for lice or nits. Any head lice policies will need to be maintained at the school level.

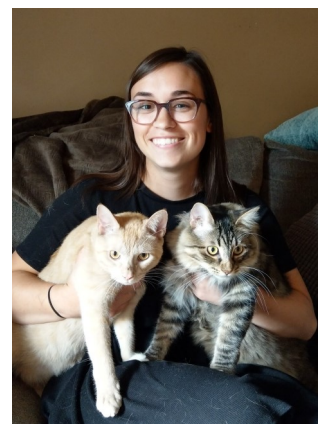
For more information targeted to schools or childcare facilities in your jurisdiction, we encourage the use of the Classroom Communicable Disease Handbook. The handbook is currently being updated to reflect changes in regulation and can be found here: [http://www.kdheks.gov/epi/disease\\_investigation.htm](http://www.kdheks.gov/epi/disease_investigation.htm).



## Epi Spotlight - Allison Zaldivar

Allison Zaldivar is an epidemiologist with the Infectious Disease Epidemiology and Response Section (IDER) at the Kansas Department of Health and Environment (KDHE). She has worked in IDER since July 2017. Her work focuses on vaccine preventable diseases—specifically, varicella and acute flaccid myelitis. Allison earned a Master of Public Health degree from the University of Kansas Medical Center in 2017.

Allison grew up in Carbondale, KS and currently lives in Lawrence. She enjoys traveling, crafting, reading, and playing various recreational sports. Allison also cherishes (brief) snuggles with her cats Chunk and Archie.



## UPDATE EPITRAX DATA QUALITY INDICATORS

by Sheri Tubach, MPH MS

The Bureau of Epidemiology and Public Health Informatics has implemented a set of monthly quality indicators and performance measures to encourage data quality improvement in EpiTrax and timeliness of investigations. I have now included Chronic Hepatitis B in these calculations. Additionally, I am now calculating the performance measures of interview attempt and interview completion using either the report date to the LHD or the date the event was created in EpiTrax. The disease specific targets for interview initiation and interview completion can be found below. I hope that these performance measures will be more helpful in prioritizing case investigations.

For questions, contact Sheri Tubach at [sheri.tubach@ks.gov](mailto:sheri.tubach@ks.gov).

August 2018		State’s Total Number of Cases* = 337	
EpiTrax Indicators			
EpiTrax Field	Number of Cases with Field Completed		Percent Completed
Address City	335		99
Address County	337		100
Address Zip	334		99
Date of Birth	337		100
Died	297		88
Ethnicity†	283		84
Hospitalized	295		88
Occupation	169		50
Onset Date	249		74
Pregnancy††	118		80
Race †	293		87
Sex †	337		100
Persons Interviewed	211		63
Persons Lost to Follow-Up	32		10
Persons Refused Interview	1		0
Persons Not Interviewed	93		27
	Number of Cases		Percent of Cases
Interview was attempted within the target for each disease ^52	152		47
Case investigations were completed within the target for each disease ^	136		42

\*Calculations do not include Hepatitis B - chronic, Hepatitis C – Chronic or acute, or Animal Rabies

\*\* Out-of-state, discarded, deleted or those deemed to be not a case are not included in this calculation.

† Unknown considered incomplete.

†† Pregnancy completeness calculated on females only

<sup>^</sup> See the table below for interview attempt and completed case interview targets

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## Disease Targets

Diseases	Disease Control (Days)*	Completed Case Investigation (Days)**
Anthrax; Botulism; Brucellosis; Cholera; Diphtheria; Hantavirus Pulmonary Syndrome; Hepatitis A; Influenza deaths in children <18 years of age; Measles; Meningitis, bacterial; Meningococcemia; Mumps; Plague; Poliomyelitis; Q Fever; Rabies, human; Rubella; Severe acute respiratory syndrome (SARS); Smallpox; Tetanus; Tularemia; Viral hemorrhagic fever; Yellow fever	1	3
Varicella	1	5
Pertussis	1	14
Campylobacter infections; Cryptosporidiosis; Cyclospora infection; Giardiasis; Hemolytic uremic syndrome, post diarrheal; Hepatitis B, acute; Legionellosis; Listeriosis; Salmonellosis, including typhoid fever; Shigellosis; Shiga-toxin Escherichia coli (STEC); Trichinosis; Vibriosis (not cholera)	3	5
Arboviral disease (including West Nile virus, Chikungunya, and Dengue); Haemophilus influenzae, invasive disease; Streptococcus pneumoniae, invasive	3	7
Ehrlichiosis / Anaplasmosis; Lyme disease; Malaria; Spotted Fever Rickettsiosis	3	14
Hepatitis B, chronic; Hepatitis C, chronic; Hepatitis C, acute; Leprosy (Hansen disease); Psittacosis; Streptococcal invasive, drug-resistant disease from Group A Streptococcus; Toxic shock syndrome, streptococcal and staphylococcal; Transmissible spongiform encephalopathy (TSE) or prion disease	N/A	N/A

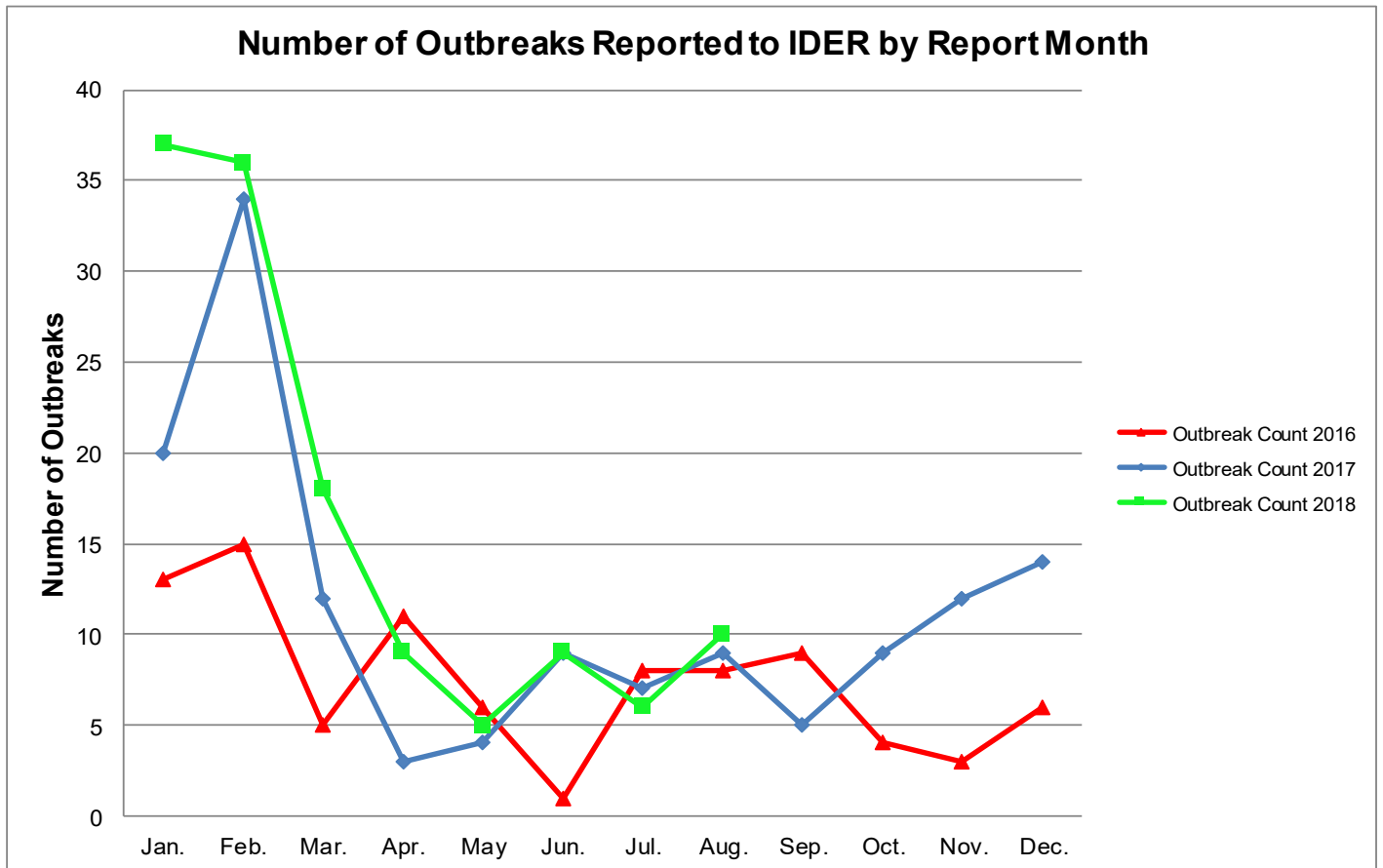
### Monthly Disease Counts

Please refer to the Cumulative Case Reports of Diseases ([http://www.kdheks.gov/epi\\_case\\_reports\\_by\\_county.htm](http://www.kdheks.gov/epi_case_reports_by_county.htm)) for current case count information.

**\*Disease Control:** Calculated by using EpiTrax Fields: (Date LHD Investigation Started) OR (Call Attempt 1 date for Salmonellosis and STEC) - (Date Reported to Public Health) OR (Date Reported to KDHE)

**\*\*Completed Case Investigation:** Calculated by using EpiTrax fields: (Date LHD Investigation Completed) - (Date Reported to Public Health) OR (Date Reported to KDHE)

## Outbreaks Report



Date Reported	Facility Type	Transmission/Exposure	Disease/Condition	County
8/6/2018	Unknown	Food	Unknown Etiology	Wyandotte
8/8/2018	Restaurant	Food	Unknown Etiology	Johnson
8/10/2018	Religious facility	Food	Salmonellosis	Doniphan
8/17/2018	Child care center	Person-to-person	Unknown Etiology	Saline
8/20/2018	Healthcare Facility	Person-to-person	Carbapenem-resistant Klebsiella species	Johnson
8/24/2018	Restaurant	Other/Unknown	Unknown Etiology	Sedgwick
8/27/2018	Restaurant	Food	Unknown Etiology	Leavenworth
8/28/2018	Community	Person-to-person	Pertussis	Reno
8/29/2018	Unknown	Other/Unknown	Salmonellosis	Multi-state
8/30/2018	Fair or festival	Other/Unknown	Shiga toxin-producing Escherichia coli (STEC)	Cowley